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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035
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|--|-----------------------------|--------------------------------------|--|
| POWER OF ATTORNEY OR AUTHORIZATION OF AGENT | Application Number | PCT/FI2003/000751 | |
| | Filing Date | | |
| | First Named Inventor | Petter Honkalampi | |
| | Title | Press Section in a Paper or Board... | |
| | Group Art Unit | | |
| | Examiner Name | | |
| Attorney Docket Number | METSO-41 | | |

I hereby appoint:

| | | | | |
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| <input checked="" type="checkbox"/> | Practitioners at Customer Number | 36528 | → | |
| OR | | | | |
| <input type="checkbox"/> | Practitioner(s) named below: | | | |
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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| Country | | | |
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I am the:

| | |
|--|---|
| <input checked="" type="checkbox"/> | Applicant/Inventor |
| <input type="checkbox"/> | Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.71(b) is enclosed. (Form PTO/SB/96). |
| SIGNATURE of Applicant or Assignee of Record | |

| | | | |
|-----------|--------------------------|--|--|
| Name | Petter Honkalampi | | |
| Signature | <i>Petter Honkalampi</i> | | |
| Date | 13.4.2005 | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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| <input checked="" type="checkbox"/> | *Total of | 3 | forms are submitted. |
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| | Examiner Name | | |
| Attorney Docket Number | METSO-41 | | |

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| Country | | | |
| Telephone | | Fax | |

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| <input type="checkbox"/> | Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.71(b) is enclosed. (Form PTO/SB/96). | | |
| SIGNATURE of Applicant or Assignee of Record | | | |
| Name | Petter Halme | | |
| Signature |  | | |
| Date | 14.4.2005 | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | |
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| | First Named Inventor | Petter Honkalampi | |
| | Title | Press Section in a Paper or Board... | |
| | Group Art Unit | | |
| | Examiner Name | | |
| Attorney Docket Number | METSO-41 | | |

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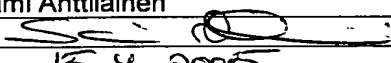
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I am the:

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| <input checked="" type="checkbox"/> | Applicant/Inventor |
| <input type="checkbox"/> | Assignee of record of the entire interest. See 37 CFR 3.71 <i>Statement under 37 CFR 3.71(b) is enclosed. (Form PTO/SB/96).</i> |

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|---|--|--|
| Name | Sami Anttilainen | | |
| Signature |  | | |
| Date | 15.4.2005 | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
with Initial
Filing



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
Required)

| | |
|--------------------------|-------------------|
| Attorney Docket Number | METSO-41 |
| First Named Inventor | Petter Honkalampi |
| COMPLETE IF KNOWN | |
| Application Number | |
| Filing Date | |
| Group Art Unit | |
| Examiner Name | |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural Names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Press Section in a Paper or Board Machine

(Title of the Invention)

The specification of which



Is attached hereto

OR



was filed on (MM/DD/YYYY)

10/10/2003

as United States Application Number or PCT International

Application Number

PCT/FI2003/000751

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--|--|---|
| | | | | YES | NO |
| 20022057 | FI | 11/19/2002 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION — Utility or Design Patent Application

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Name:

Address:

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| Country: | Telephone: | Fax: |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

| | |
|--|--|
| Given Name (first and middle [if any]): <u>Petter</u> | Family Name or Surname: <u>Honkalampi</u> |
|--|--|

| | |
|---|------------------------|
| Inventor's Signature <u>Petter Honkalampi</u> | Date: <u>13.4.2005</u> |
|---|------------------------|

| | | | |
|----------------------------------|--------|----------------------------|-----------------|
| Residence: City: <u>Kinkomaa</u> | State: | Country: Finland <i>FI</i> | Citizenship: FI |
|----------------------------------|--------|----------------------------|-----------------|

Mailing Address: Kinkoriantie 21

| | | | |
|-----------------------|--------|-----------------------|-------------------------|
| City: <u>Kinkomaa</u> | State: | Zip: <u>FIN-40930</u> | Country: <u>Finland</u> |
|-----------------------|--------|-----------------------|-------------------------|

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

| | |
|---|---|
| Given Name (first and middle [if any]): <u>Petteri</u> | Family Name or Surname: <u>Halme</u> |
|---|---|

| | |
|---|------------------------|
| Inventor's Signature <u>Petteri Halme</u> | Date: <u>13.4.2005</u> |
|---|------------------------|

| | | | |
|-----------------------------------|--------|----------------------------|-----------------|
| Residence: City: <u>Jyväskylä</u> | State: | Country: Finland <i>FI</i> | Citizenship: FI |
|-----------------------------------|--------|----------------------------|-----------------|

Mailing Address: Anttoninkatu 26 A 3

| | | | |
|------------------------|--------|-----------------------|-------------------------|
| City: <u>Jyväskylä</u> | State: | Zip: <u>FIN-40250</u> | Country: <u>Finland</u> |
|------------------------|--------|-----------------------|-------------------------|

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

| | | | |
|---|---|---|------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]): Sami | | Family Name or Surname: Anttilainen | |
| Inventor's Signature |  | | Date: 15.4.2005 |
| Residence: City: Jyväskylä | State: | Country: Finland | Citizenship: FI |
| Mailing Address: Muurariintie 9 B 7 | | | |
| City: Jyväskylä | State: | Zip: FIN-40250 | Country: Finland |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]): | | Family Name or Surname: | |
| Inventor's Signature | | | Date: |
| Residence: City: | State: | Country: | Citizenship: |
| Mailing Address: | | | |
| City: | State: | Zip: | Country: |
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]): | | Family Name or Surname: | |
| Inventor's Signature | | | Date: |
| Residence: City: | State: | Country: | Citizenship: |
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